

03500.014971

PATENT APPLICATION



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

TSUKASA SAKO

Application No.: 09/729,346

Filed: December 5, 2000

For: IMAGE PROCESSING  
SYSTEM FOR PROCESSING  
PHOTOGRAPHING IMAGES

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Examiner: A. Tabatabai  
)  
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Group Art Unit: 2625  
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:  
March 30, 2004

Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RECEIVED**

APR 07 2004

Technology Center 2600

PRELIMINARY AMENDMENT

Sir:

Prior to further examination of the above-identified application for which a Request For Continued Examination has been filed, please amend the application as follows:

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:

March 30, 2004  
(Date of Deposit)

Michael K. O'Neill  
(Name of Attorney for Applicant)

Signature

March 30, 2004  
Date of Signature

04/05/2004 CNGUYEN 00000121 09729346

02 FC:1202 180.00 OP  
03 FC:1201 172.00 OP

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RCE/2700

In re Application of:

TSUKASA SAKO

Application No.: 09/729,346 APR 02 2004

Filed: December 5, 2000

For: IMAGE PROCESSING SYSTEM FOR  
PROCESSING PHOTOGRAPHING IMAGES

Docket No. 03500.014971

Examiner: A. Tabatabai

Group Art Unit: 2625

Date: March 30, 2004

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 36	MINUS	** 26	= 10	x \$9 \$18	180.00
INDEP. CLAIMS	* 6	MINUS	*** 4	= 2	x \$43 \$86	172.00
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$352.00

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

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- Verified Statement claiming small entity status is enclosed, if not filed previously.
- A check in the amount of \$ 352.00 is enclosed.
- Charge \$ \_\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- A check in the amount of \$ \_\_\_\_\_ to cover the fee for a \_\_\_\_\_ month extension is enclosed.
- A check in the amount of \$ 770.00 to cover the Request For Continued Examination (RCE) fee is enclosed.
- Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
\_\_\_\_\_  
Michael K. Dikil  
Attorney for Applicant  
Registration No. 32622

FITZPATRICK, CELLA, HARPER & SCINTO  
30 Rockefeller Plaza  
New York, New York 10112-3800  
Facsimile: (212) 218-2200

Form #120

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